



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
[www.uspto.gov](http://www.uspto.gov)



Bib Data Sheet

CONFIRMATION NO. 4002

SERIAL NUMBER 09/775,805	FILING OR 371(c) DATE 02/05/2001 RULE	CLASS 424	GROUP ART UNIT 1648	ATTORNEY DOCKET NO. 1579-548
-----------------------------	--	--------------	------------------------	------------------------------------

**APPLICANTS**

Barton F. Haynes, Durham, NC;  
 Hua-Xin Liao, Chapel Hill, NC;  
 Norman Letvin, Newton, MA;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CIP of 09/497,497 02/04/2000 ABN

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED**

\*\* 02/27/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY NC	SHEETS DRAWING 0	TOTAL CLAIMS 8	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

**ADDRESS**

23117

**TITLE**

HUMAN IMMUNODEFICIENCY VIRUS IMMUNOGENIC COMPOSITION

FILING FEE RECEIVED 1140	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
-----------------------------	---	---